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SENDER WITH		CHECK CLASSIFICATION TOP AND BOTTOM	
UNCLASSIFIED		CONFIDENTIAL	SECRET
CENTRAL INTELLIGENCE AGENCY OFFICIAL ROUTING SLIP			
TO	NAME AND ADDRESS	INITIALS	DATE
1	Mr. [REDACTED]		
2	Deputy Director (Plans)		
3	Acting Deputy Director (Support)		
4			
5			
6			
ACTION		DIRECT REPLY	PREPARE REPLY
APPROVAL		DISPATCH	RECOMMENDATION
COMMENT		FILE	RETURN
CONCURRENCE		INFORMATION	SIGNATURE
<b>Remarks:</b> All copies to go to ADDS for approval and distribution as follows: Orig + 1 to Director of Personnel 2 cys. to ADDS 1 cy. to Comptroller 1 cy. to DD/P 1 cy. to DD/I 1 cy to C/Management Staff all copies have attachments.			
FOLD HERE TO RETURN TO SENDER			
FROM: NAME, ADDRESS AND PHONE NO.			DATE
Chief, Management Staff			5/7/50
UNCLASSIFIED		CONFIDENTIAL	SECRET

FORM NO. 237  
1 APR 55Replaces Form 30-4  
which may be used.(40)  
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